



Customer & Division
Address
City/State/Zip
Contact
Telephone ()
Customer P/N
Type of Equipment
Application

A. Shaft Diameter _____ **D. Shaft Chamfer & Angle** _____
B. Bore Diameter _____ **E. Bore Chamfer & Angle** _____
C. Seal Width _____

<input type="checkbox"/> OEM <input type="checkbox"/> Aftermarket	Date Required
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		Annual Usage	Peak Month Usage
Shaft	<input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical	Material	Finish
Bore		Material	Finish
Motion	<input type="checkbox"/> Rotating	RPM Normal Max	Direction From Air Side: <input type="checkbox"/> Clockwise <input type="checkbox"/> Counter-Clockwise <input type="checkbox"/> Bi-Rotational
	<input type="checkbox"/> Reciprocating	Shaft Runout TIR	Misalignment
	<input type="checkbox"/> Oscillating	Stroke Length	Cycles/Min
		Degrees of Arc	Cycles/Min.
Fluid	Internal	Type	<input type="checkbox"/> Dry <input type="checkbox"/> Mist <input type="checkbox"/> Flooded
	External	Type	
Temp.	<input type="checkbox"/> °C <input type="checkbox"/> °F	Min. Normal Max.	
Pressure	Normal PSI	Maximum PSI	
Bearing	<input type="checkbox"/> Ball or Roller Bearing <input type="checkbox"/> Bushing		